## Description

A final undisputed invoice will be submitted for the following:

- Close-out of Fiscal Year
  - a. A final undisputed invoice to close out each Fiscal Year will be submitted for payment.
- Expiration of Grant Term
  - a. A final undisputed invoice will be submitted at expiration of grant term
  - b. A Contractor's Release Form must be included.

## **Final Invoice Format**

The final invoice to close out each fiscal year or at the expiration of the Grant term will be submitted in the same format as Quarterly invoices and will be the final Quarterly invoice or the final Supplemental invoice.

An Excel file is provided by OFP containing templates for fiscal administration. Use of this workbook is *mandatory*. Spreadsheets are provided in this file for all four quarterly and supplemental invoices. Instructions for completing invoices are located on the first tab of the workbook titled "Guide".

An original and one copy of the invoice must:

- Be printed on Agency letterhead,
- · Have the box checked on the quarterly or supplemental invoice,
- Be signed (in blue ink) by the Fiscal Officer (or designee).
- Contain all pages of the invoice including the detail pages,
- Include the Contractor Equipment Purchased with DHS Funds form if equipment is purchased in the invoice period,
- Have the box checked if it is a final invoice for the Fiscal Year, and
- Include a signed "Contractor's Release" only when submitting the final invoice at the expiration of the Grant term (refer to your executed grant for specific Exhibit number).

## Submitting an Invoice

A final undisputed invoice shall be submitted for payment no more than ninety (90) calendar days following the expiration or termination date of this agreement, unless a later or alternate deadline is agreed to in writing by the program contract manager. Said invoice should be clearly marked "Final Invoice", thus indicating that all payment obligations of the State under this agreement have ceased and that no further payments are due or outstanding.

The State may, at its discretion, choose not to honor any delinquent final invoice if the Grantee fails to obtain prior written State approval of an alternate final invoice submission deadline. Written State approval shall be sought from the program contract manager prior to the expiration or termination date of this agreement.

Invoices will be submitted to:

Contract Manager
California Department of Health Services
Maternal, Child and Adolescent Health/Office of Family Planning
MS 8305
P.O. Box 997420
Sacramento, CA 95899-7420

If using Courier Delivery (i.e. UPS, FedEx, Golden State Overnight, etc.) deliver to:

Contract Manager
California Department of Health Services
Maternal, Child and Adolescent Health/Office of Family Planning
MS 8305
1615 Capitol Avenue, Suite 73.560
Sacramento, CA 95814-5015

Note: All document deliveries not including the mail station number MS 8305 will be returned to sender by the DHS Mail Services Unit.

## **Receipt of Payment**

Allow forty-five (45) to sixty (60) days for processing of a grant payment from the date OFP receives your request. Please contact your Contract Manager if you have not received your payment within sixty-five (65) days.